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FACSIMILE TRANSMISSION

TO: Examiner Susan C. Alimenti FROM: Jonathan M. Hines
Art Unit 3644 Reg. No. 44,764

DATE: September 10, 2004 FAX NO: (703) 872-9306

RE: Our File No. 3108/2; U.S. Serial No. 10/655,258

CONFIRMATION COPY
TO FOLLOW:

YES

NO

✓

NUMBER OF PAGES Cover + 11

MESSAGE: Please see the attached Response for U.S. Serial No. 10/655,258 filed in
reply to Office Action dated August 17, 2004.

Also, please confirm receipt of this facsimile. Thank you.

If any problems in transmission occur, please contact Delia Dominguez, Legal Assistant

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PTO/SB/21 (02-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/655,258
	Filing Date	September 4, 2003
	First Named Inventor	Bruce R. Friedrich
	Art Unit	3644
	Examiner Name	Susan C. Alimenti
	Attorney Docket Number	3108/2
Total Number of Pages in This Submission		11

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks Please charge any fees due to Deposit Account No. 01-0265.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Jonathan M. Hines; Reg. No. 44,764 ADAMS EVANS, P.A.
Signature	<i>Jonathan M. Hines</i>
Date	September 10, 2004

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Typed or printed name	Delia Dominguez
Signature	<i>D. Dominguez</i>
Date	September 10, 2004

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SEP 10 2004

Appl. No. : 10/655,258 Confirmation No. 6157
Applicant : B. Fraedrich, et al.
Filed : September 4, 2003
TC/AU : 3644
Examiner : S. Alimenti

Docket No. : 3108/2
Customer No. : 23638

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE

Sir:

This is in response to the Office Action of August 17, 2004.

Amendments to the Specification are not being submitted at this time.

Amendments to the Drawings are not being submitted at this time.

Amendments to the Claims begin on page 4 of this paper.

Remarks begin on page 10 of this paper.

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